## BEST AVAIL

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PTO/SB/17 (10-03)

FEE TRANSMITTAL			Complete if Known						
for FY 2004		Application Number 09				9/967,029			
					Sep	September 28, 2001			
Effective 10/01/2003. Patent fees are subject to annual revision.					<u> </u>	urie, Keith			
Applicant claims small entity status. See 37 CFR 1.27						atel, Mital B.			
						61			
TOTAL AMOUNT OF PAYMENT (\$) 385						016354-004500US			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other None			FEE CALCULATION (continued) 3. ADDITIONAL FEES						
Deposit Account:	[] Note	Large	Entity	Small	Entity				
Deposit		Fee Code	Fee (\$)	Fee Code	Fee	Fee D	escription	Fee	
Account 20-1430 Number		1051	( <b>\$)</b> 130	2051	(\$) 65	Surcharge - late	•	Paid	
		1052	50	2052	25	Surcharge - late	provisional filing fee		
Deposit Account		1053	130	1053	130	or cover sheet.	oification	<b></b>	
Account Name Townsend and Townsend and Crew	LLP	1812	2,520	1812	2,520	Non-English spec	cification est for reexamination	-	
The Director is authorized to: (check all that apply)		1804	920*	1804	920°		ication of SIR prior to		
Charge fee(s) indicated below Credit any overpayments			1,840*	1805	1,840*	Examiner action	ication of SIR after		
Charge any additional fee(s) or any underpayment of fee(s)			440			Examiner action			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1251 1252	110 420	2251 2252	55 210	•	ly within first month		
FEE CALCULATION		1252	720	2232	210	Extension for rep month	ny within second	1	
1. BASIC FILING FEE		1253	950	2253	475	Extension for rep	ly within third month		
arge Entity Small Entity		1254	1,480	2254	740	Extension for rep	ly within fourth		
ee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid	1255	2,010	2255	1,005	Extension for rep	ly within fifth month		
Code (\$)		1401	330	2401	165	Notice of Appeal			
002 340 2002 170 Design filing fee		1402	330	2402	165		upport of an appeal		
003 530 2003 265 Plant filing fee		1403	290	2403	145	Request for oral I	-		
004 770 2004 385 Reissue filing fee		1451	1,510	1451	1,510	Petition to institut proceeding	te a public use		
005 160 2005 80 Provisional filing fee		1452	110	2452	55		- gragypidajale. F- 1	V/F	
SUBTOTAL (1) (\$)		1453	1,330	2453	655	Petition to revive Petition to revive	- Unibertational	AFI	
· · · · · · · · · · · · · · · · · · ·		1501	1,330	2501	655	Utility issue fee (c	or reissue)	2003	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1502	480	2502	240	Design issue fee	esign issue fee $NDV~2~4$		
Fee from		1503	640	2503	320	Plant issue fee			
Extra Claims below	Fee Paid	1460 1807	130 50		130 50	Petitions to the Petitions related t	CHNOLOGY CE	NTER A	
Total Claims -** = X						applications	io provisional		
ndependent -** = ================================		1806	180	1806	180		ormation Disclosure		
	<u> </u>	8021	40	8021	40	Stmt Recording each p	natent assignment		
Aultiple Dependent						per property (time			
arge Entity Small Entity		1809	770	2809	385	properties) Filing a submission	on after final rejection	$\vdash$	
ee Fee Fee Fee Code (\$) Fee Description		1910	770	2040	205	(37 CFR § 1.129(	a))		
202 18 2202 9 Claims in excess of 20		1810	770	2810		For each addition examined (37 CF)		1	
201 86 2201 43 Independent claims in a	excess of 3	1801	770	2801	385	Request for Conti	inued Examination	385	
203 290 2203 145 Multiple dependent clair		1802	900			(RCE)	diana	363	
over original patent	over original patent			1802 900 1802 900			Request for expedited examination of a design application		
205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			Other fee (specify)						
•			Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)385						
**or number previously paid, if greater; For Reissues, see above	Reduce	d by Basi	c Filing F	ee Paid	SUBTOTAL (3	3) (4)363			
product, rot nessues, see above									
SUBMITTED BY	- · · <u> </u>					Com	plete (if applicable)		
Name (Print/Type) Patrick M. Boucher Registration No. (Attorne		y/Agent)	gent) 44,037			Telephone 303-571-4000			
Signature . Potate Gre						Date	November 13, 2003		
WARNING: Information on this form								-	